

• €	<u> </u>									
		UTILITY	Attorney Docket No.		ORT-1489					
	d H	PATENT APPLICATION	First Named Inven	itor o	r Application Identifier					
≣∤	)	TRANSMITTAL	THUR	MOI	ND, Robin					
ı		(only for new nonprovisional applications	Express Mail No.		EK275419131US					
L		under 37 CFR 1.53(b))								
ı		APPLICATION ELEMENTS			Commissioner for Patent	S				
ŀ		See MPEP Chapter 600 concerning			ENT APPLICATION					
ŀ	1	utility patent application contents.			on, DC 20231	은				
١	1. 2.	<ul> <li>✓ Fee Transmittal Form (attached hereto in duplicate)</li> <li>✓ Specification [Total Pages: 8]</li> </ul>	£	_	er Frogram (Appendix)	٠				
	۷.		7. Nucleotide and/or			. <u>6</u>				
		- Descriptive Title of the Invention	a. Computer Rea		f applicable, all necessary)	38				
		- Cross References to Related Applications			al to computer copy)	_				
1		<ul> <li>Statement Regarding Fed sponsored R&amp;D</li> </ul>			identity of above copies	90				
		- Reference to Microfiche Appendix		-78	,	jı				
1		<ul><li>Background of the Invention</li><li>Brief Summary of the Invention</li></ul>	<u>ACCOMPANYIN</u>	IG A	PPLICATION PARTS	<u> </u>				
		- Brief Description of the Drawings (if filed)	8. 🛛 Assignment Pape	rs (co	ver sheet & document(s))					
1		- Detailed Description	9. 37 CFR 3.73(b) St							
1		- Claim(s)			ee) Power of Attorney					
	_	- Abstract of the Disclosure	10. English Translati		ocument (if applicable)					
102	3.	☐ Drawing(s) (35 USC 113) [Total Sheets: 1]	(IDS)/PTO-1449 []							
	4.	Oath or Declaration	12. Preliminary An	_						
:		<ul><li>a.</li></ul>	13. Return Receipt							
(0) 321 321		c. Copy from a prior application (37 CFR 1.63(d))	(Should be specifically	itemi	ized)					
\$ \$		(for continuation/divisional check boxes 5 and 16)	14. Certified Copy							
## ##		Deletion of Inventor(s): Signed statement attached deleting	(if foreign priority is cl	aime	d)					
## ::	_	inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)								
	Э.	Incorporation by Reference (useable if Box 4c is checked)  The entire disclosure of the prior application, from which a	15 M Others Erromage	. N.T5	ll Cantification					
#Ę		copy of the oath or declaration is supplied under Box 4c, is	15. Other: Express	VIA	n Certification					
Kill Gill		considered as being part of the disclosure of the accompanying								
## -		application and is hereby incorporated by reference therein.								
25°		16. If a CONTINUING APPLICATION, check appropriate			•					
14		Amend the specification by inserting before the first line:		1 [	Divisional					
#		Continuation-in-Part (CIP) of prior application No.:	, illed							
ı		17. If a DIVISIONAL APPLICATION, please cancel original Cla	ims of the pric	nr ann	lication before					
ı		calculating the filing fee.		" upp						
Ī		18. Correspondence Address:								
		Customer Number or Bar Code Label	or 🛛 Correspondence	Add	lress below:					
		Name: Philip S. Johnson, Esc								
		Address: Johnson & Johnson	•			11017 U.S. PTO 00/938941				
1		One Johnson & Johns	on Plaza							
		New Brunswick, NJ 08933-7003, USA								
İ	-	19. <b>Telephone Contact</b> : Please direct all telephone call	s or tele-faxes to John V	V. W	allen. III at:					
		<del>-</del>	ax: (732) 524-2808		, =					
		SIGNATIURE OF APPLICANT, ATTO		UIR	ED					
		NAME John W. Wallen, III	, Esq.							
		Reg No. 35,403								
ſ		SIGNATURE ////////////////////////////////////	DATE 2//	//	(a. 0 ± 0 x)	ì				

724/01

Complete if Known		
Application Number	Not Assigned	
Filing Date	24 August 2001	
First Named Inventor	THURMOND	·
Group Art Unit	Not Assigned	
Examiner Name	Not Assigned	•
Attorney Docket Number	ORT-1489	

## **FEE CALCULATION**

## **CLAIMS AS FILED**

(1)	(2)	(3)	(4)	(5)
FOR:	NUMBER FILED	NUMBER EXTRA	RATE	BASIC FEE (\$710.00)
TOTAL CLAIMS	4 - 20 =	0	x 18.00	\$ 0.00
INDEPENDENT CLAIMS	4 - 3 =	1	x 80.00	\$ 80.00
MULTIPLE DEPENDENT CLAIMS		N/A	\$270.00	
		1	TOTAL FEES	\$ 790.00

-<del>DAN: 100750 - 059389</del>41

710.00 CH

## **METHOD OF PAYMENT**

Please charge Deposit Account No. 10-0750/ORT-1489/JWW in the amount of \$790.00. Three copies of this sheet are enclosed.

The Commissioner is hereby authorized to charge any additional fees which may be required in connection with the filing of this communication, or credit any overpayment, to Account No. 10-0750/ORT-1489/JWW. Three copies of this sheet are enclosed.

/ SUBMITTED BY	Complete (if applicable)
Typed or Printed Name John W, Wallen, III,	Reg. No. 35,403
Signature MMM Wall Will	Deposit Account No. 10-0750

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Robin THURMOND, Siquan SUN and Lars KARLSSON

For: METHOD OF MONITORING THE EFFECT OF CATHEPSIN

**S INHIBITORS** 

Filed: 24 August 2001

**Express Mail Certificate** 

"Express Mail" mailing number: EK275410367US

Date of Deposit: 24 August 2001

I hereby certify that this complete application, including specification pages, claims, informal drawings, Assignment, Declaration and Power of Attorney, is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

Amy M. Sheridan

(Typed or printed name of person mailing paper or fee)

(Signature of person mailing paper or fee)